FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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		OMB A	PPI	$30V\Delta I$	_

OMB Number:

3235-0076 Expires: November 30, 2001

Estimated average burden hours per response . . . 16.00

SEC USE ONLY					
Prefix		Serial			
DA	TE RECEIV	ED			

Name of Offering (check	if this is an amendment ar	nd name has change	ed, and in	dicate change.)	
Koning Corporati					
Filing Under (Check box(es) the	at apply): 🔲 Rule 504	☐ Rule 505 ☐	Rule 506	☐ Section 4(6) [ULOE
Type of Filing:	g 🔲 Amendment				
	A. BASIC	CIDENTIFICATIO	N DATA		
1. Enter the information reques					
	this is an amendment and i	name has changed,	and indica	ate change.)	
Koning Corporation		. 0' 0 7		<u> </u>	02035406
Address of Executive Offices 789 Elmgrove Rd., Blo		treet, City, State, Z N.Y. 14624	ip Code)		(Including Area Code)
Address of Principal Business C			ii Cada	(716) 275–13	
(if different from Executive Off		treet, City, State, 2	.ip Code)	relephone Number ((Including Area Code)
Brief Description of Business					
Development of Ir	maging Povigog				PROCESSE
bevelopment of in	liaging bevices				
Type of Business Organization					
☑ corporation	☐ limited partnership,	, already formed			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
☐ business trust	☐ limited partnership,		1	other (please speci	THOMSON FINANCIAL
		Month	Year		71171101111
Actual or Estimated Date of Inc	corporation or Organizatio	\mathbf{n} : $\begin{bmatrix} \mathbf{U} & 1 \end{bmatrix} \begin{bmatrix} 0 \end{bmatrix}$	2 (nated
Jurisdiction of Incorporation or	· ·				
· ·		nada; FN for other			DE
GENERAL INSTRUCTIONS		<u>-</u>			
Federal: Who Must File: All issuers makin et seq. or 15 U.S.C. 77d(6).	g an offering of securities in	n reliance on an exer	mption und	der Regulation D or Se	ection 4(6), 17 CFR 230.501
When To File: A notice must be the U.S. Securities and Exchang if received at that address after the	e Commission (SEC) on th	ne earlier of the dat	e it is rece	rived by the SEC at t	he address given below or,
Where to File: U.S. Securities ar	nd Exchange Commission,	450 Fifth Street, N	I.W., Was	hington, D.C. 20549.	
Copies Required: Five (5) copies of the copi					d. Any copies not manually
Information Required: A new filing, any changes thereto, the info A and B. Part E and the Append	ng must contain all informa	ition requested. Amo	endments i	need only report the n	
Filing Fee: There is no federal fi	ling fee.				
State:					
This notice shall be used to indic hat have adopted ULOE and that n each state where sales are to be, ion, a fee in the proper amount aw. The Appendix to the notice	have adopted this form. Issu, or have been made. If a st shall accompany this form constitutes a part of this r	ners relying on ULOI ate requires the pay in This notice shall notice and must be	E must file ment of a be filed in	a separate notice with fee as a precondition the appropriate state	the Securities Administrator to the claim for the exemp-
Failure to file notice in th	e appropriate states v	ATTENTION — will not result in	a loss	of the federal exe	emption. Conversely,

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

exemption is predicated on the filing of a federal notice.

failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Ning, Ruola Business or Residence Address (Number and Street, City, State, Zip Code) 11 Meadowlark Drive, Penfield, New York 14526 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Codé) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address

				В.	INFORM	LA NOITA	OUT OF	ERING					
1. Has	the issuer	sold, or	does the is	suer intend	d to sell, to	non-accr	edited inve	stors in th	is offering	?		Yes	No
							nn 2, if fili				• • • • • • • • •	🗆	Ž
2 Wh:	at is the m	inimum i										• 20	
2. ** 112	a: 13 (11 c 111		are sement		c accepted	HOIR ZHY	MOIVIOUS	<i>i</i>			• • • • • • • •		000
3. Doe	s the offer	ring permi	it joint ow	nership of	a single u	nit?						Yes DX	No
sion to b list t	or similar e listed is a	remunera an associa of the brol	tion for sol ted person ker or deal	icitation o or agent o er. If more	f purchaser of a broker e than five	s in connector dealer (5) person	ction with s registered v is to be list	ales of sec with the Si ed are ass	urities in th	ndirectly, and offering. with a statement of such	If a perso	on •	
Full Nam	e (Last na	me first, i	if individua	al)	-				·				
		N/A											
Business	or Residen	ce Addres	s (Number	and Stree	et, City, St	ate, Zip C	Code)						
Name of	Associated	Broker o	or Dealer	· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·				
States in	Which Per	son Liste	d Has Solid	ited or In	tends to S	olicit Purc	hasers						
												□ Ali	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	{GA}	(HI)	(ID	
(IL)	[IN]	[IA]	[KS]	(KY)	(LA)	[ME]	[MD]	[MA]	[M1]	(MN)	[MS]	[MO	_
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	OR	[PA	•
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	{ VT }	[VA]	[WA]	[WV]	[WI]	[WY]	(PR]
	or Residence			and Stree	t, City, Sta	ate, Zip C	ode)						
Name of	Associated	Broker o	r Dealer										
States in \	Which Pers	son Listed	Has Solic	ited or Int	tends to Sc	licit Purcl	hasers					 -	
(Check	"All State	s" or chec	k individu	al States)		· · · · · · · · · · · ·						□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IN]	[[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	- (MO	•
[MT] [*]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[UJ] [TX]	(NM) (UT)	[NY] [VT]	[NC] - [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	(OR)	[PA [PR	
	(Last nan				(0.)		(773)	[[" "]		1 ** 1]		<u>, </u>
Business o	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	ode)						
Name of A	Associated	Broker or	Dealer										
States in V	Vhich Pers	on Listed	Has Solici	ted or Inte	ends to So	licit Purch	asers		. :				
	"Ail States								• • • • • • • • • • • • • • • • • • • •			□ All :	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]		[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[I L]	[1N]	[[A-] ⁻¹	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	•
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	
[RI]	I SC 1	l SD 1	ITNI	ITXI	IUTI	IVTI	1 VA 1	(WA)	(WV)	IWII	(WY)	I PR	1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	S
	Equity	<u>\$ 1,500,000</u>	<u>s 20,000</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	s
	Partnership Interests	\$	S
	Other (Specify)	S	S
	Total	\$ 1,500,000	\$ 20,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate
		Investors	Dollar Amount of Purchases
	Accredited Investors	<u></u>	<u>\$ 20,000</u>
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$U
	Regulation A		s
	Rule 504		s 0
	Total		s
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees	🛭	\$ 5.000
	Accounting Fees	⊠	\$ 2.500
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		S
	T	ľΏI	t 7.500

<u>-</u>	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND	USE	OF PROCEED	<u> </u>	
	b. Enter the difference between the aggregate off tion 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference	is the		s 1,49	2,500
5.	Indicate below the amount of the adjusted gross sused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	unt for any purpose is not known, furnite. The total of the payments listed must	sh an equal			
				Payments to Officers, Directors, & Affiliates	•	ents To hers
	Salaries and fees				-	
	Purchase of real estate					
	Purchase, rental or leasing and installation of					
	Construction or leasing of plant buildings and					
	•		₩ 3.			
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another	□ \$.	<u> </u>	□ s	
	Repayment of indebtedness	•••••			□ s	
	Working capital		□ 5 .		≥ \$1,49	2 , 500
	Other (specify):		□ \$.		- \$	
			п.		п.	
	Column Totals					
	Total Payments Listed (column totals added)				,492,500	
		D. FEDERAL SIGNATURE			<u> </u>	
ol	e issuer has duly caused this notice to be signed by owing signature constitutes an undertaking by the issect of its staff, the information furnished by the issection	the undersigned duly authorized person ssuer to furnish to the U.S. Securities an	d Exe	hange Commis	sion, upon wi	itten re-
SSI	ner (Print or Type)	Signature	7	Date		
-	Koning Corporation	Burla M.		1	/2/02	
	me of Signer (Print or Type)	Title of Signer (Print or Type)				
]	Ruola Ning	President				
		<u> </u>				

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE			
		0.262 presently subject to any of the disquali		Yes	Z ⁰ []
	-	See Appendix, Column 5, for state respon	se.		
2. The undersign Form D (17 C	led issuer hereby under EFR 239,500) at such t	takes to furnish to any state administrator of a imes as required by state law.	any state in which this notice is f	îled, a not	ice on
3. The undersign issuer to offer		takes to furnish to the state administrators, upo	on written request, information	furnish ed 1	y the
limited Offeria	ng Exemption (ULOE)	at the issuer is familiar with the conditions that of the state in which this notice is filed and undestablishing that these conditions have been seeman.	derstands that the issuer claimin	to the Ung the avails	iform ibility
The issuer has read undersigned duly a		cnows the contents to be true and has duly cau	used this notice to be signed on	its behalf t	y the
Issuer (Print or Ty	pe)	Signature	Date		<u>.</u>
Name (Print or Ty	pe)	Title (Print or Type)			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.